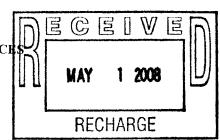
## ARIZONA DEPARTMENT OF WATER RESOURCE

Water Management Division 3550 North Central Ave, 2<sup>nd</sup> Floor Phoenix, Arizona 85012-2105 Phone (602) 771-8585 Fax (602) 771-8689



APPLICATION FOR A RECOVERY WELL PERMIT (§ 45-834.01)

APPLICATION FEE OF \$ 50.00 PER WELL FOR THE 1ST 10 WELLS PLUS \$ 10.00 PER WELL THEREAFTER IS DUE UPON FILING

1. Name of Applicant: City of Surprise

PERMIT FEE (SAME AS APPLICATION FEES), PLUS NOTICE AND PUBLICATION FEES TO BE DETERMINED, ARE DUE PRIOR TO ISSUANCE OF PERMIT.

PLEASE SUBMIT ONE ORIGINAL AND TWO COPIES OF THE COMPLETED APPLICATION AND ALL SUPPORTING MATERIALS.

FOR (	OFFICE USE ONLY
Application No.	74-565003.0006
Date Received _	5-1-08

	12425 W. Bell Road, Suite D100 Mailing Address	Surprise	AZ	85374-9002
	Maining Address	City	State	Zip
	Contact Person Christine Nunez	Telephone <u>623.222.7035</u>	Fa	x <u>623,222.1002</u>
2.	Name of Active Management Area or Irrigation	on Non-Expansion Area if applicabl	e, and name of	groundwater basin and
	subbasin where the facility will be located We	est Salt River Valley Subbasin in	the Phoenix A	Active Management
	Area.			
3.	Name of the owner(s) of the land where wellsite  Mailing Address 7505 East 6 <sup>th</sup> Avenue, No.			11.0
	(If more than one owner attach	a list showing corresponding land	- Attachmen	1 1 for Consent
4.	Legal description of the land where water will b	(quarter/quarter/qu <b>Attachment</b> : <b>area</b>	21, 22 & 23, 7 arter/section, to	
5.	The recovered water will be used for Construct	ion & Future Service Area		

or long-term storage account number. 70-441155

7. Complete the following for each constructed well. If data supplied differs from the ADWR well registry, please submit a change of well information form. Attach supplement if needed.

Name of Well Owner	Well Registration Number	Location: 1/4,1/4, 1/4, Section. Township, Range	Design Pump Capacity (GPM)	Hole Depth (Feet)	Casing Diameter (Inches)	Proposed Annual Volume (Acre-Feet)	Date Well Constructed
Buena Vista Holdings LLC	55-214510	NW SW NW § 11 T4N R3W	1,900	1,500	16	2,742	9/2007
Cityo J Suspins	55-589835	B(3-1)17ddc	1500	1420	16	ATTA	2005
						15001	
!							
			<del>-</del>				

8. Complete the following for each proposed well to be constructed.

Well Registration Number	Location: 1/4,1/4,1/4, Section, Township, Range	Design Pump Capacity (GPM)	Hole Depth (Feet)	Casing Diameter (inches)	Proposed Annual Volume (Acre-feet)	Estimated Date of New Well Construction	Estimated Time Required To Complete Well

I (We), 44 of Surp) the penalty of perfury, that the information belief true, correct and complete.	OSL contained and state	, the applicant(s) na ments made herein	med in this application are to the best of n	n, do hereby certify under ny (our) knowledge and
623.222.7001 Telephone	Signature of owner	r or authorized agent	Semple.	1 4/17/08
	Di rec	for of	Water	Services
12425 W. Bell Road, #D100		Surprise	AZ	85374-9002
Mailing Address		City	State	Zip
STATE OF ARIZONA  County of Maricopa	) ) ss. )		G NO	OFFICIAL SEAL ILORIA G. BIANCO ITARY PUBLIC - State of Arteone MARICOPA COUNTY y Comm. Expires Sept. 1, 2009
Subscribed and sworn to before me this  Subscribed and sworn to before me this	$\frac{24}{\omega}$ day of	april	, 20 <u>48</u>	